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DECLARATION FOR UTILITY O	'	cket Number					
DESIGN							
PATENT APPLICATION		COMPLETE IF KNOWN					
(37 CFR 1.63)	Application	Number					
Declaration Declaration	Filing Date						
Submitted OR Submitted afte With Initial Filing (surchan	ge Art Unit						
Filing (37 CFR 1.16 (required)	e)) Examiner N	Examiner Name					
I hereby declare that: Each inventor's residence, mailing address, and citit believe the inventor(s) named below to be the ong	·		1				
which a patent is sought on the invention entitled:	<u> </u>		atter without is claimed and for				
Floss Dispenser Cap Slandra SENZON 32 BRIDGES PATA Southampton, MY							
	(Title of the Invention)	7.70					
the specification of which	,						
is attached hereto							
0R							
was filed on (MM/DD/YYYY) as United States Application Number or PCT International							
Application Number and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Foreign Application Country	oreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes No				
·							
Additional foreign application numbers are lister	d on a supplemental price	ority data sheet P	TO/SB/02B attached hereto.				

[Page 1 of 2]
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PTO/SB/01 (08-03)

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DECLARATION — Utility or Design Pat nt Application

Direct all correspondence to:	Customer Number	:		OR _	Corres	spondence address below
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	00 MADISON	HVE.		· · · · · · · · · · · · · · · · · · ·		_
City			State	/		ZIP
ν	ew York		N-)	/		10016
Country	ew York Telephor TMELICY 212-	ne 124. (8	44	Fax 212-25	- -2 -06	<u> </u>
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST IN	IVENTOR:	Ap	etition has	been filed for th	is unsigr	ned inventor
Given Name				Family Name		
(first and middle [if any])	SANDRA SE	NZON	,	or Sumame		
Inventor's	()	.,,			· · · · · · · · · · · · · · · · · · ·	Date
	Sandre Seny					11/13/03 nship Mekjc4 W
Residence: City	State / t /		Country		Citize	nship
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Mailing Address	_ /		_ ,			
32 Brid	iEs Path		T			
City	State		ZIF	968		Country
Southampton	N-V		1 11	76 D	1	America
NAME OF SECOND INVENTO)R:		A	petition has be	en filed f	for this unsigned inventor
Given Name	у.			Family Name		
(first and middle [if any])				or Surname		
Inventor's Signature						Date
Residence: City	State		Country		Citizer	nship
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Mailing Address						
City	State		ZIP		Count	ïy
	/.					
Additional inventors or a legal rep	presentative are being named on	thes	supplemental s	sheet(s) PTO/SB/02/	4 or 02LR :	attached hereto.

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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention							
As the below named	inventor(s), I/we declare that:						
This declaration is di	rected to:						
	The attached application, or						
	Application No, filed on,						
	as amended on(if applicable);						
I/we believe that I/we sought;	e am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is						
	and understand the contents of the above-identified application, including the claims, as amended by any ally referred to above;						
material to patentab became available b	I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.						
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.							
FULL NAME OF INV	, ,						
Signature:	SANDRA SENZUN andew Deug Citizen of Whites States of America						
Inventor two:							
Signature:	Citizen of:						
Signature:	Citizen of:						
Inventor four:							
Signature:	Citizen of:						
Additional inver	ntors or a legal representative are being named on additional form(s) attached hereto						

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page of						
							
Name f Additional Joint Inventor, if any:		A pe	tition h	nas been filed for this u	insigned in	ventor	
Given Name (first and middle (if any)	Family Name or Sumame						
					٠	•	
Inventor's Signature VO+ appli	cabl	O			Date		
Residence: City	State				Citizenship		
Mailing Address				/			
Mailing Address					.,		
City	State	tate Zip			Country		
Name of Additional Joint Inventor, if any:							
Given Name (first and middle (if any) Family Name or Sumame							
Inventor's Signature		Date					
Residence: City	State	tate Country Ci			Citizenship		
Mailing Address		/					
Mailing Address							
City	State	•		Zip	Country		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any)	Family Name or Sumame						
				•			
Inventor's Signature		Date					
Residence: City	State				Citizenship		
Mailing Address							
Mailing Address							
City State Zip Country							

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DECLARATION – Supplemental Priority Data Sheet

Foreign applications:					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
	Not Abblic				

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